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THE ELEPHANT IN THE ROOM: SOCIAL MEDIA AS A TOOL

To the Editor:

Luc and colleagues¹ are to be congratulated for the success of the Thoracic Surgery Social Media Network (TSSMN) as a collaborative effort by the *Journal of Thoracic and Cardiovascular Surgery* and *Annals of Thoracic Surgery* to increase the journals' readership and communication with the cardiothoracic community. Social media has become a tool dividing the surgical community into early adopters and early majority that successfully integrated the use of Twitter and other platforms in their academic or clinical practice and opponents fearing the lack of professionalism and privacy of such means.² Twitter has been used widely in medicine for scholarly dissemination, conference tweeting, academic discussions, professional advice, and more, all owing to its instantaneous, asynchronous nature to connect like-minded people and experts worldwide. Leveraging that aspect is one with great power: training our current and future colleagues around the world.

Large disparities exist in the access to safe, timely, and affordable cardiac care in different parts of the world. High-income countries rely on an average of 7.15 cardiac surgeons per million population, whereas low-income countries possess only 0.04 per million—a 179-fold difference in provider density.³ Many low- and middle-income countries (LMICs) are yet to welcome their first permanent cardiothoracic surgeon, and for those that already have, few have the luxury to attend conferences, pursue advanced training, or receive continuing medical education (CME). Social media, through Twitter Chats, sharing of procedural videos and research, and CME opportunities, can overcome such barriers. In addition to TSSMN, the platform Global Cardiac Surgery (@GlobalCardiac) platform aims to disseminate open access information and highlight barriers individual facilities face in LMICs. In just a few months, @GlobalCardiac's following grew to more than 1000 followers, owing in part to its pronounced Twitter activity

and unique blog highlighting existing gaps and recent success stories.

Similarly, future generations of cardiothoracic surgeons are widely active on social media and in student surgical societies.⁴ For them, social media is a free and low-threshold tool to keep abreast of the latest research, build their networks, and find meaningful mentorship despite disparities underlying surgical disciplines.⁵ Some live in areas where they aspire to become the first-ever cardiothoracic surgeons, whereas some simply seek to learn more from experts in different parts of the world. InciSioN (International Student Surgical Network; @InciSioNGlobal) accordingly unites thousands of future surgeons in more than 80 countries, using social media (eg, Global Surgery Journal Club; @GlobalSurgeryJC) and online platforms as tools to stimulate discussions by the future of the operating room.⁴

Social media has become ingrained in today's world, with nearly 3 billion people using at least 1 social media platform. Although hazards exist, conscious and ethical use of social media should be viewed not as a waste of time or an arduous task, but rather as an opportunity and a tool.² Younger generations and colleagues worldwide benefit from online discussions and scholarly dissemination to an extent greater than may be perceived. TSSMN and social media use by the cardiothoracic community should be welcomed and embraced, changing the field for the better.

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